

**Registration Form**  
***Enrichment/Goalball Weekend***

**Weekend Date:**

**Student Name:** \_\_\_\_\_

**Birthdate:**\_\_\_\_\_ **Grade:** \_\_\_\_\_

**Parents Name:**

\_\_\_\_\_  
**Mailing Address:**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_/\_\_\_\_\_

**Specific interests/needs (dietary, technology, Braille etc):**

\_\_\_\_\_  
**Outreach Consultant:**

\_\_\_\_\_  
**Name and ages (under 18) of all people attending with you:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Rooms are available in the cottage for no charge – they are on a first come first serve basis. I request rooms in the cottage for \_\_\_\_ people. The people staying are:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please return to:**

**Carol Clayton-Bye  
3911 Central Ave  
Great Falls, MT 59405  
406-771-6083**